

**RESOLUTION NO. 2018-03**

**A RESOLUTION OF THE VILLAGE COMMISSION OF THE VILLAGE OF BISCAYNE PARK, FLORIDA, AUTHORIZING THE APPROPRIATE VILLAGE OFFICIALS TO EXECUTE ALL DOCUMENTS NECESSARY BETWEEN THE VILLAGE OF BISCAYNE PARK AND STATE OF FLORIDA, DEPARTMENT OF HEALTH TO ESTABLISH A CLOSED POINT OF DISPENSING (POD); PROVIDING FOR AN EFFECTIVE DATE**

WHEREAS, the Village has considered the establishment of a Closed Point of Dispensing (POD) for medications during a public health emergency; and

WHEREAS, the Centers for Disease Control & Prevention (CDC) has established the Strategic National Stockpile (SNS), which includes medical countermeasures and supplies; and

WHEREAS, the CDC, through Department of Health (DOH), will provide SNS assets to the DOH in Miami-Dade County (DOH in MDC) in event of a declared public health emergency affecting its jurisdiction; and

WHEREAS, the DOH approves the transfer of a specific pre-identified quantity of the aforementioned medical countermeasures and supplies to the Closed POD; and

WHEREAS, the DOH wishes to collaborate with the Closed POD to enhance its ability to respond to a catastrophic biological incident or other significant public health threat; and

WHEREAS, the Village Commission finds it to be in the best interests of the Village to authorize the appropriate Village officials to execute all documents necessary to establish a Closed Point of Dispensing (POD).

**NOW, THEREFORE, BE IT RESOLVED BY THE VILLAGE COMMISSION OF THE VILLAGE OF BISCAYNE PARK, FLORIDA:**

**Section 1.** The appropriate Village officials are hereby authorized to execute the Memorandum of Agreement between the State of Florida, Department of Health and the Village of Biscayne Park, attached hereto and incorporated herein as Exhibit "1".

**Section 2.** This Resolution shall be effective upon adoption.



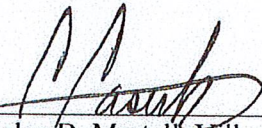
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4 PASSED AND ADOPTED this 6th day of March, 2018.  
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7 The foregoing resolution upon being put  
8 to a vote, the vote was as follows:  
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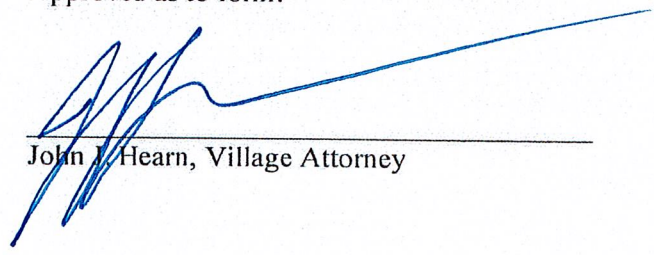
10 Mayor Truppman:  
11 Vice Mayor Ross:  
12 Commissioner Bilt:  
13 Commissioner Johnson-Sardella:  
14 Commissioner Tudor:  
15

16   
17 \_\_\_\_\_  
18 Tracy Truppman, Mayor  
19

20 Attest:

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22 \_\_\_\_\_  
23 Marlon D. Martell, Village Clerk  
24 **CHRISTINA CASERTA, ACTING**  
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29 Approved as to form:

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31 \_\_\_\_\_  
32 John J. Hearn, Village Attorney  
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**Memorandum of Agreement**  
**Between**  
**State of Florida, Department of Health**  
**And**  
( \_\_\_\_\_ )

This Memorandum of Agreement (MOA) is entered into, by and between the State of Florida, Department of Health, hereinafter referred to as the DOH in MDC, and \_\_\_\_\_, herein after referred to as the Closed Point of Dispensing Organization or Closed POD.

**RECITALS/BACKGROUND**

WHEREAS the Centers for Disease Control & Prevention (CDC) has established the Strategic National Stockpile (SNS), which includes medical countermeasures and supplies; and

WHEREAS the CDC, through DOH, will provide SNS assets to the DOH in Miami-Dade County (DOH in MDC) in event of a declared public health emergency affecting its jurisdiction; and

WHEREAS the DOH approves the transfer of a specific pre-identified quantity of the aforementioned medical countermeasures and supplies to the Closed POD; and

WHEREAS the DOH wishes to collaborate with the Closed POD to enhance its ability to respond to a catastrophic biological incident or other significant public health threat,

NOW THEREFORE, in consideration of the foregoing, the parties hereto agree as follows:

**I. Purpose**

- ☒ This MOA delineates the responsibilities of the DOH and the Closed POD organization for activities related to the prophylaxis of approximately (enter # of population provided by the Closed POD) individuals and their family members in the event of a catastrophic biological incident or other significant public health threat.
- ☒ This MOA outlines the scope of work between the Closed POD and the DOH.
- ☒ This MOA does not create a contractual relationship between the parties.

**II. Scope**

- A. The provisions of this MOA apply to activities to be performed as a result of the implementation of the Florida Health in Miami-Dade County Strategic National Stockpile/Cities Readiness Initiative Deployment Plans.
- B. No provision in this MOA limits the activities of the DOH in performing local and state functions.

**III. Definitions**

- A. Emergency Support Function-8 (ESF-8) Health & Medical: As defined in the National Response Plan, when activated, Emergency Support Function 8 provides the coordination of health and medical response and recovery activities in support of the Emergency Operations Center (EOC); the ESF-8 Health & Medical Group is a functional group within the Operations Section of the EOC's Incident Command System.
- B. Point of Dispensing (POD): Location for dispensing medical countermeasures and related supplies to citizens in a public health emergency; may be a Public POD open to the general public or Co-operating Business/Government Partner POD (Closed POD)

established specifically for the employees (or members) of the entities and their family members.

- C. Prophylaxis: Medical countermeasures and related supplies designed to prevent the occurrence and spread of disease.
- D. Strategic National Stockpile (SNS): A national repository of antibiotics, chemical antidotes, antitoxins, life support medications, and medical supplies managed by the CDC.
- E. SNS "Push-Pack": A specific quantity of emergency medical supplies designed to be delivered anywhere in the United States within 12 hours of the decision to deploy.
- F. Identified Population: Employees, contractors, essential personnel, and/or residents of the Closed POD entity and their family members who would receive medical countermeasures and related supplies in the event of SNS deployment.
- G. The Project BioShield Act of 2004 (Public Law 108–276; "the Act"), among other provisions, established the comprehensive Emergency Use Authorization (EUA) program. The US Emergency Use Authorization (EUA) is a critical new tool for medical and public health communities and is applicable for both civilian and military use. It fills the need for timely and practical medical treatment under emergency conditions and authorizes use of the best product available for treatment or prevention when the relevant product has not already been approved or approved for this specific use by the US Food and Drug Administration. The need for and genesis of the EUA, its requirements, its broad application to civilian and military populations, and its features of particular importance to physicians and public health officials are detailed.

#### **IV. DOH shall be responsible for:**

- A. Providing the Closed POD organization with available health screening forms, educational materials, training, and other resources to be used in the event of a catastrophic public health emergency requiring the mass prophylaxis of the identified population.
- B. Providing the Closed POD with as much advance notice as is feasible of the decision to request and deploy SNS assets.
- C. Providing to the appropriate State-level personnel the pre-established quantities of medical countermeasures and related supplies required, pre-established delivery locations, and appropriate site contact information.
- D. Providing, to the extent sufficient SNS assets are allocated to the jurisdiction, assets to the Closed POD in quantities established by the Closed POD based on its best available information.
- E. Establishing and managing a local staging area, either independently or in conjunction with regional partners, where closed POD will accept custody of allocated assets.
- F. Providing a point of contact at the DOH who may provide pre-event technical assistance and training to prepare for mass dispensing activities.
- G. Providing telephone and fax numbers to the ESF8 representatives at the Emergency Operations Center.

**V. The Closed POD Organization shall be responsible for:**

- A. Developing a plan to screen its members and their family members' prior to dispensing of medication, and distributing appropriate educational information using the forms, handouts, and other materials provided by the DOH.
- B. Providing the DOH with the number of individuals in the identified population detailing, to the extent possible, the proportion of adult and pediatric members who would receive medical countermeasures at the Closed POD in the event of SNS deployment.
- C. Identifying primary, secondary, and tertiary contacts for notifications and asset transfer.
- D. Identifying primary and secondary locations where assets will be dispensed.
- E. Receiving and securing the allotment of medical countermeasures and related supplies.
- F. Picking up and securing the allotment of medical countermeasures and related supplies from the established staging area;
- G. Ensuring that a medical dispensing professional (physician, pharmacist, ARNP, PA, dentist, podiatrist, or other medical professional authorized to dispense at the time of the event) is on-site to oversee all dispensing operations.
- H. Utilizing medical countermeasures and related materials supplied by the DOH to provide prophylaxis to its own identified population.
- I. Collecting completed client registration forms for individuals receiving countermeasures and maintaining inventory of medical countermeasures and related supplies received and dispensed.
- J. Ensuring that no fee of any kind is charged for the material or any function associated with dispensing activities.
- K. Returning any unused medical countermeasures and related supplies and completed inventory forms and accounting for all medical countermeasures dispensed, to the DOH.
- L. Contacting the ESF-8 representative at the Emergency Operations Center if additional medical countermeasures and related supplies are required to provide sufficient regimens for the intended population.

**VI. Closed POD demographic and contact information.**

**A. Demographics of identified personnel:**

Total Agency # Essential Personnel: \_\_\_\_\_

Total Agency # Support Personnel \_\_\_\_\_

Total Agency # Personnel Household: \_\_\_\_\_

Total Agency Population to receive prophylaxis: \_\_\_\_\_

**B. Closed POD Contact Information:**

Contact information for individuals to receive notification and individuals authorized to accept custody of assets included as Attachment A of this MOA.

## **VII. Conditions, Amendments, and Termination**

- A. Requests for information, confidentiality. This Memorandum of Agreement is governed for public records purposes by Ch. 119, Florida Statutes. Additional federal laws may apply. Where federal law forms a basis to prevent disclosure of the terms of this MOA, the parties agree that neither will disclose the nature of this effort and the terms of this agreement to any person or entity, except as may be necessary to fulfill its mission and statutory and regulatory responsibilities. The parties agree to notify one another before releasing materials or information relating to this MOA pursuant to federal or state freedom of information act statutes or similar provisions in law.
- B. DOH, its agents, servants and employees are protected against tort claims as described in Section 768.28, Florida Statutes. The exclusive remedy for injury or damage resulting from such negligent acts or omissions of such agents, servants and employees of DOH is by action against the State of Florida.
- C. Federal Immunity: The PREP Act sets forth the immunity for "covered persons" from tort claims related to, in this case, "covered countermeasure," following a PREP ACT declaration of public health emergency by the United State Health and Human Services (HHS) Secretary. The Closed POD may be considered a "covered person," a Program Planner of countermeasure, i.e., individuals and entities involved in planning, administering or supervising programs for distribution of a countermeasure..." as addressed by HHS PREP Act Q&As. 42 USC §247d-6d(i)(2)(B)(iii). As a covered person, if applicable, entity may be immune from suit and liability under Federal and State law with respect to "all claims for loss caused by, arising out of, relating to, or resulting from the administration to or the use by an individual of a covered countermeasure...". 42 U.S.C. § 247d-6d(a)(1).
- D. Any provision of this MOA later found to be in conflict with Federal or State law or regulation, or invalidated by a court of competent jurisdiction, shall be considered inoperable and/or superseded by that law or regulation. Any provision found inoperable is severable from this MOA, and the remainder of the MOA shall remain in full force and effect.
- E. The parties agree that the terms of this MOA may be revised at any time only by formal written agreement, executed by both parties herein. Each party reserves the right to change its Demographic and/or Contact information, including related sites or addresses, if applicable, without prior written agreement or notification, but will notify the other party within a reasonable period of time, not exceeding thirty (30) days after such a change. All notices to be given under this MOA shall be in writing, sent via e-mail, by courier, or by certified mail, return receipt requested, postage prepaid, to the contacts indicated for the other party on Attachment A or B.
- F. EFFECTIVE DATE: The terms of this agreement will become effective on \_\_\_\_ \_\_, 20\_\_, or on the date on which this MOA has been signed by both parties, whichever is later. This MOA shall be reviewed annually by the parties from the effective date of this agreement.
- G. The parties agree that this MOA shall continue in effect until terminated.
- H. Either party may terminate this MOA at any time by giving the other party written notice at least 30 days prior to the intended termination date.
- I. The parties expressly agree that no relationship of employer/employee, principal agent, or other association shall be created by this MOA between the parties or their directors,

officers, agents, or employees. The parties agree that they will never incur any obligations on the part of the other party.

- J. This MOA is non-exclusive. Thus, the parties reserve the right to enter into similar agreements or understandings with other parties.
- J. This MOA contains all the terms and conditions agreed upon by the parties. There are no provisions, terms, conditions, or obligations other than those contained herein.
- K. The parties warrant and represent that they have the authority to enter into this MOA and any person signing it on their behalf has been duly authorized to execute this MOA for them.

#### VIII. No Private Right Created

This Document is an internal agreement between the State of Florida, Department of Health and [REDACTED] and does not create or confer any right or benefit on any other person or party, private or public. Nothing in this agreement is intended to restrict the authority of either signatory to act as provided by law or regulation, or to restrict any agency from enforcing any laws within its authority or jurisdiction.

In witness whereof, the parties have executed this Memorandum of Agreement effective upon the Effective Date set forth above.

\_\_\_\_\_  
\_\_\_\_\_  
State of Florida, Department of Health

Signed: _____	Signed: _____
Name: _____	Name: _____
Title: _____	Title: State of Florida, Department of Health in Miami-Dade County Administrator
Date: _____	Date: _____

Attachment A: Closed POD Demographic and Contact Information

Attachment B: DOH Contact Information

**Attachment A – Demographic and Contact Information**

**A. Closed POD Demographic Information**

Identified Population:

Total Agency # Essential Personnel: \_\_\_\_\_

Total Agency # Support Personnel \_\_\_\_\_

Total Agency # Personnel Household: \_\_\_\_\_

Total Agency Population to receive prophylaxis: \_\_\_\_\_

**B. Closed POD Contact Information**

Primary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Tertiary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**C. Closed POD representative authorized to accept assets**

Primary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Tertiary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## **Attachment B – DOH Contact Information**

*The following are pre-event contacts; during the notification phase of activation, contact information for the relevant DOH Liaison will be provided.*

### **Director, Public Health Preparedness:**

Natasha Strokin, MPA  
8175 NW 12<sup>th</sup> Street Suite 300  
Miami, Florida 33126  
(786)-336-1332 Office  
[Natasha.Strokin@flhealth.gov](mailto:Natasha.Strokin@flhealth.gov)

### **Coordinator, Cities Readiness Initiative:**

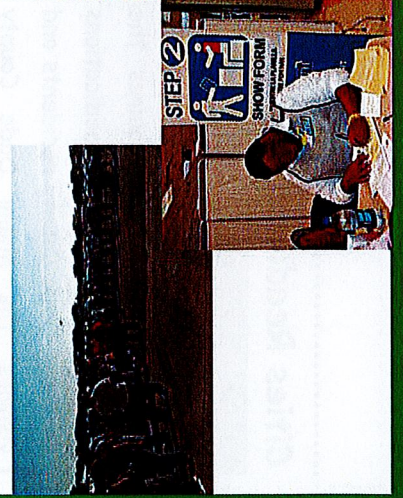
Alazandria Cruze, MPH, CPH  
8175 NW 12<sup>th</sup> Street Suite 301  
Miami, Florida 33126  
(305)-470-6931 Office / (786)-606-1274 Mobile



## What is CRI?

In the event of a catastrophic public health emergency, large segments of the population may need to receive medications quickly. In densely populated areas, such as Miami Dade County, this becomes a daunting task that requires a high level of efficiency and community cooperation.

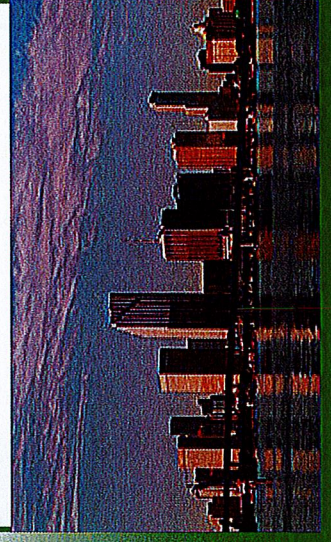
The Cities Readiness Initiative (CRI) is a federally funded program designed to prepare cities to dispense needed medical countermeasures in the form of drugs and medical supplies to their populations within 48 hours of the decision to do so.



# PROTECTING YOUR ORGANIZATION DURING PUBLIC HEALTH EMERGENCIES

The Cities Readiness Initiative and  
You

Presented by the Public Health  
Preparedness Office of the



### For More Information

Miami Dade County Health Department  
Public Health Preparedness Program  
Cities Readiness Initiative

305-470-6928

or

[MiamiDadeCRI@doh.state.fl.us](mailto:MiamiDadeCRI@doh.state.fl.us)



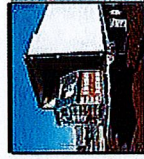


## Cities Readiness Initiative Closed POD Overview

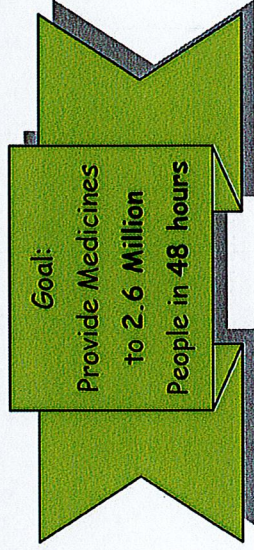
### The CRI Plan

If an incident that requires the large scale dispensing of medications to Miami Dade County residents and visitors, the Miami Dade County Health Department (MDCHD), working with federal, state, and local agencies, will activate a county wide network of sites to dispense medications.

These sites, called "PODs" or Points of Dispensing, will be operated by the MDCHD and will be open to the public. These



PODs will be highly strained in any event where the entire population of Miami Dade County needs to get medications in a short period of time. To increase our ability to reach the entire population within the required time frame and to reduce the burden on public PODs, the MDCHD is partnering with organizations such as yours to establish Closed PODs.



### WE NEED YOU!

Closed PODs are private dispensing sites that will provide medications or supplies to a specific group of people. By partnering with public health, business, universities, military installations, faith based, and community organizations are taking steps to ensure their populations are taken care of without having to visit a public POD. Your personnel and their families receive essential medications more quickly, your organization keeps operating, and crowds are reduced at public PODs. *Everybody wins!*

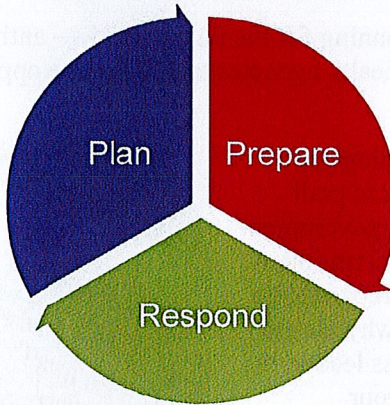
### Closed POD Partner Role

- ✓ Developing a Closed POD plan
- ✓ Participating in training and exercise opportunities
- ✓ Dispensing medications following Miami Dade County Health Department guidance during declared public health emergencies.

### Miami Dade County Health Department Role

- ✓ Pre-event planning and technical assistance
- ✓ Developing training and exercise opportunities
- ✓ Coordinating the allocation and transfer of assets at the time of an event





# Toolkit <sup>SNS</sup>

## Closed Pod Partner

Stakeholders  
Medical **CRI** Health  
Activation  
Protect  
Cities Readiness Initiative

Organization  
Planning  
Point  
Clients  
Private  
Natural Disasters  
Participation  
Community

Supplies  
Mass Vaccination  
Emergency  
Dispensing  
Education  
Family  
Partner Plan

Countermeasures  
Bioterrorism  
Federal Prophylaxis  
Man Made Disasters  
Dispense

Strategic National Stockpile  
State  
COOP  
Vaccination  
Open POD  
Exercises  
Closed POD  
Local  
Safe





## YOUR EMPLOYEES' HEALTH...

You protect your business by planning for the unexpected — anticipating events and managing situations at hand. Local public health agencies take the same approach to protecting the health and safety of our communities.

In today's world of terrorism, biological terrorism, active shooters and the overall unknown, collaboration between government and private industry is more important than ever in the areas of emergency preparedness and homeland security. That is why we are *calling* on you, as a local business leader, to help protect your organization, your employees and the community by making your business a Closed Point of Dispensing (POD) for medications during a public health emergency.

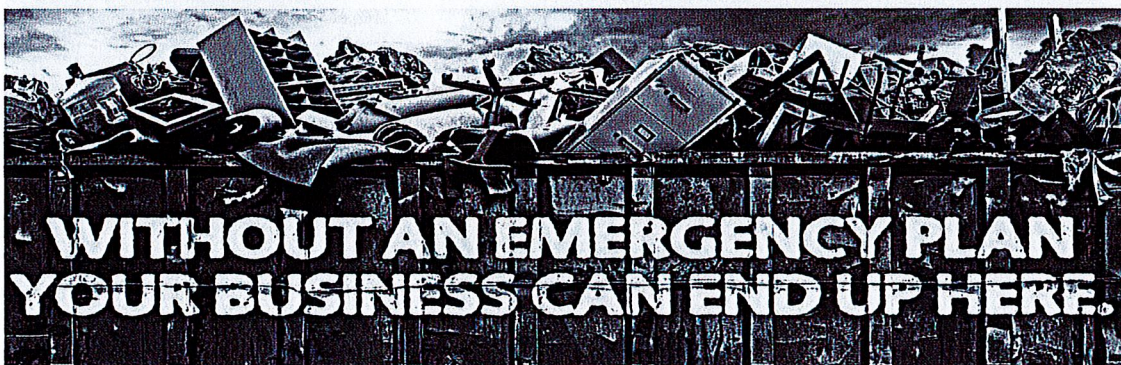


Taking a few small steps now to prepare for future public health emergencies will not only protect your greatest asset — your employees — but also help prepare the entire community to respond effectively.

## YOUR COMPANY'S FUTURE...

We are asking you to read this toolkit, and learn if a Closed POD is right for you and your business. The toolkit will answer key questions about what it takes to become a Closed POD, and how to develop such a program jointly with your local public health agency.

The toolkit is not a complete Closed POD plan, but rather a key reference document to help you begin the planning process.



We hope that this toolkit will inspire you and your staff to develop a Closed POD plan — one of the most effective ways to protect yourself and your employees during a public health emergency.



## IMAGINE THIS SCENARIO...

Whether by accident or as part of a terrorist attack, a biological agent such as anthrax has been released and millions of people across the nation are at risk, including those in Miami-Dade County. People need preventive medications immediately, so the Centers for Disease Control (CDC) ships supplies from its Strategic National Stockpile (SNS) to local public health agencies.

These agencies activate long-standing and well-rehearsed plans to dispense the prophylaxis at special sites. But even with extensive preparation there are long lines at every site as tens of thousands of people wait in line for their pills. People are stressed about missing work, trying to calm their children as they endure long waits, and tempers are starting to flare.

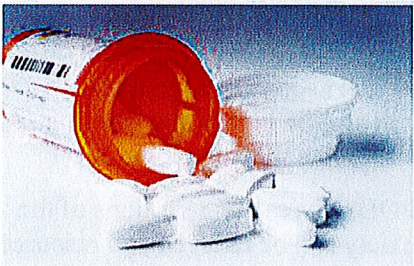


But not for you and your employees.

You planned ahead, and are activating your Closed POD. Your employees know that they and their families can avoid the public Closed PODs and get their medications at work. With important paperwork already on file, the process is quick and easy. Your employees and their families are protected from harm, and your business keeps running smoothly.

## THE STRATEGIC NATIONAL STOCKPILE...

The Strategic National Stockpile is a national supply of medications and medical supplies to be used for emergency situations such as a bioterrorism attack, pandemic influenza or natural disaster. Within 12 to 24 hours, the U.S. CDC can deploy a large shipment from the SNS, known as a 'push-pack,' anywhere in the United States or its territories, to supplement and re-supply state and local health and medical resources. After this initial shipment, additional components such as vendor-specific products and other items from the SNS may follow.



Florida Department of Health in Miami-Dade County (DOH-Miami-Dade) has plans in place to receive shipments from the SNS and distribute their contents to the community quickly and efficiently. DOH-Miami-Dade is part of the Cities Readiness Initiative (CRI) — a federally funded program that helps metropolitan areas increase their capacity to deliver prophylaxis and medical supplies during a large-scale public health emergency.

Collaboration between public health and the private sector is a crucial part of this planning effort. The use of Closed PODs, discussed in detail in this toolkit, is just one of many dispensing methods planned to deliver prophylaxis to 100 percent of the population within 48 hours.



## A PROGRAM DESIGNED TO MEET YOUR NEEDS . . .

Points of dispensing (PODs) are fixed locations where medications from the SNS can be given out to people in response to a public health threat or emergency. There are two types of PODs:



1. Closed POD - is a location that is operated by a private business for a specific population (i.e., its employees and their families). Closed PODs are **NOT** open to the public. Operating a Closed POD provides your business and your employees with extra security during a public health emergency.

2. Open POD - is a location operated by the DOH-Miami-Dade, to serve the public residing within Miami-Dade County.

## CURRENT PLANNING EFFORTS...

DOH-Miami-Dade has created plans which identify sites and resources that can support Open PODs during a public health emergency. Each site has been evaluated to ensure that it is appropriate for such use, and plans have been made for all aspects of setting up the Closed POD, including:

- Communicating with the public
- Communicating among emergency responders (police, fire and EMS)
- Transportation of prophylaxis and supplies to each site
- The flow pattern of dispensing at each site
- Security and safety precautions
- Staffing for the site, including professionals and volunteers
- Necessary supplies



During a public health emergency, DOH-Miami-Dade will need to rely on many different community partners to help provide all of the services necessary to dispense emergency medications to the population. Closed PODs will serve a vital role in the process.

Closed PODs will play an important role in any situation where it is necessary to provide emergency prophylaxis to the entire population. Open PODs will also be highly stressed in a situation where the entire population needs to be given prophylaxis in a short time frame.

Closed PODs will help relieve some of the pressure on Open PODs by reaching portions of the population independently. As a result, long lines and public anxiety can be reduced and resources will be used more efficiently.

- Closed PODs can also help businesses ensure that their employees are protected — and therefore able to continue working and/or return to work more quickly. Employees will feel secure in knowing that their company is willing to take the 'extra step' to ensure that they and their families are taken care of in the event of a public health emergency. As employees feel more confident in the steps your business has taken to protect them, they will likely feel an increased sense of commitment and loyalty.





- Finally, Closed PODs offer a more desirable way to reach certain special populations that might find it difficult to come to an Open POD.

Ultimately, the need to serve the public during a public health emergency is great. Partnering with the DOH-Miami-Dade to become a Closed POD is crucial in protecting the health of our citizens and enabling recovery efforts on a local, regional and global scale.

## PROTECTING EMPLOYEES' FAMILIES...

During any emergency, employees are most concerned with the health, safety and protection of their loved ones. Family members will form the support structure that allows your staff to continue working as the community endures and recovers from a public health emergency. For this reason, we recommend that you plan to provide medications to your employees' families as well. Though this is not a requirement to become a Closed POD, it will greatly increase buy-in and support from your employees if they know that, in an emergency, their loved ones will be provided for without having to visit an Open POD.



The exact definition of a family member is, however, up to you to decide. Definitions might include anyone claiming residence at the employee's household, those individuals identified as dependents on the employee's tax forms or insurance coverage, or an employee plus a specified number (one, three, five, etc.) of other individuals. Regardless of the approach you adopt, your decision should be clearly communicated to employees and included in your agency's POD plan. Procedures should be in place to obtain medical evaluation forms (as described above) for any individual who will be served by your Closed POD.

## EDUCATING PEOPLE...

It is important to provide accurate and complete information to your staff. Let your employees know why and how the site would be established, and how the prophylaxis dispensing process will work. This will provide your employees with confidence in the overall approach, and is an opportunity to present accurate and reassuring information before and during the emergency. The following topics should be addressed in the information/education process:

## POSSIBLE THREATENING AGENTS...

In a public health emergency it is very important that people are informed of the true nature of the threat. They need to know the answers to questions like:

- How do I know if I've been exposed?
- What are the symptoms?

- Is the disease contagious? If so, what do I need to do to protect myself and my family?
- What are the long-term implications?

\*Fact sheets regarding specific biological agents are available upon request.\*

## **1. PROPHYLAXIS...**

- Your employees will need to know about the types of prophylaxis that may be available to protect against biological agents. They need to know how long they will need to take the prophylaxis and other details related to the specific situation. Information sheets regarding prophylactic medication from the SNS are available for your review upon request. If you decide to participate as a Closed POD partner, your business will receive updated information from your local public health agency as it becomes available.

## **UNDERSTANDING THE SCREENING AND DISPENSING PROCESS...**

Completing health assessments/head of household forms (Appendix 1)

- One of the greatest values of a Closed POD is that paperwork can be completed ahead of time for the employees who will receive the emergency prophylaxis. At an Open POD, however, large numbers of people will report all at the same time, and everyone must fill out required health assessment/head of household forms before they can receive medications.
- In a Closed POD format, your business has the opportunity to provide the necessary forms to employees in advance and keep them on file until they are needed. Information can be updated periodically — perhaps annually — to reflect any changes in health status. When and if an emergency occurs, the forms will be at hand to simplify the dispensing process. Another option is that the forms can be distributed upon declaration of the Public Health emergency and collected just before the site is opened.
- You may choose to use either on-site or contracted medical personnel (see below for minimum requirements) to oversee the medical assessment process to ensure proper health safety and privacy measures are being observed.



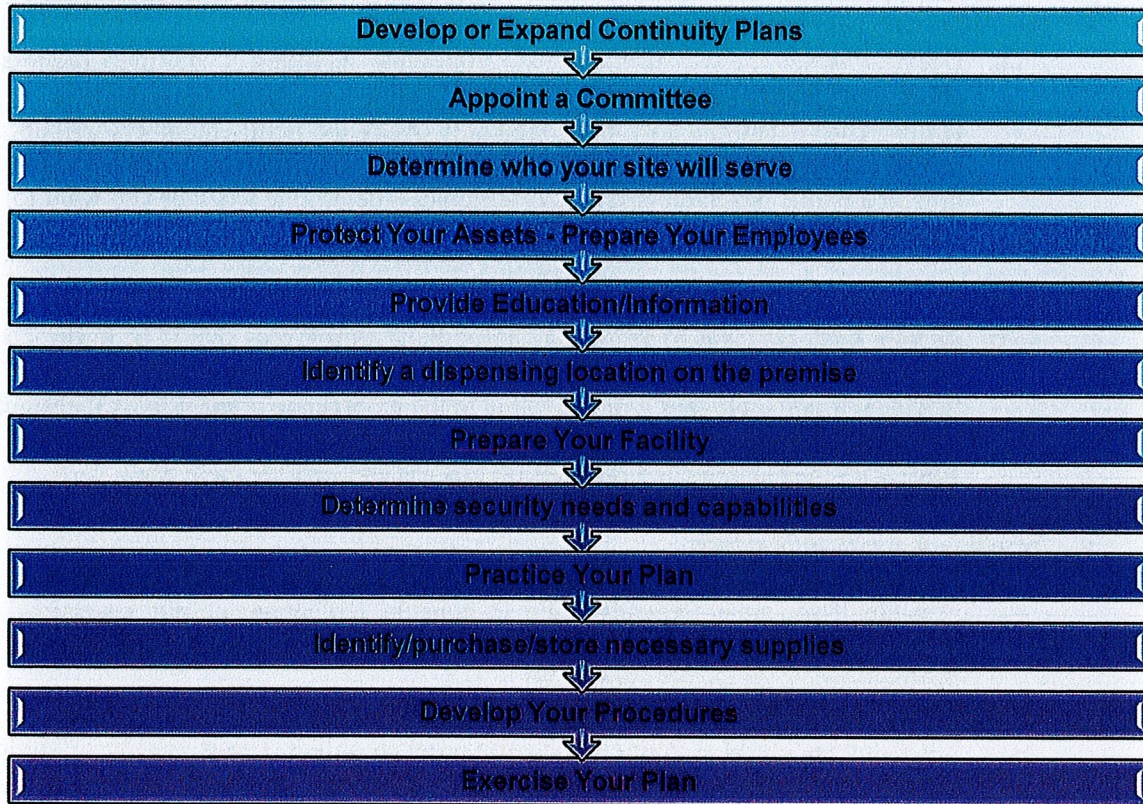
## MEDICAL PERSONNEL...

To become a Closed POD, you will need to consider what medical personnel you currently have available, and whom you could procure to dispense medications. Regulations which identify who can legally dispense medications are determined by state law and could be altered in a large scale emergency. In Florida, physicians, nurse practitioners, pharmacists and physician assistants are allowed to dispense prophylactic medications during a public health emergency. Only one medical professional must be present at each site to answer questions or screen individuals with complicated health histories.



Your business may have medical personnel already on staff, or you may choose to arrange for outside medical personnel to come into your location. Such an arrangement will require a standing agreement between your business and the outside staff, including a clear understanding of how such an agreement will be activated at a time when their services will likely be in high demand.

## PREPARING YOUR BUSINESS FOR PUBLIC HEALTH EMERGENCIES: HOW TO PLAN FOR AND SET-UP YOUR CLOSED POD...





- *Develop or Expand Continuity Plans*

- Your business should develop a comprehensive Continuity of Operations Plan (also known as a COOP). Continuity planning helps businesses, corporations and government agencies ensure that essential functions will keep going during a wide range of emergencies and events. A COOP allows you to anticipate potential emergencies and develop procedures necessary to ensure employee safety, as well as continuity of business. If you need information on how to develop a COOP for your business, we can help provide information and templates for you to follow and guide you along the process.
- If your business already has a COOP in place, update it to include a mass dispensing component and outline procedures for activating your Closed POD plan. Information in this toolkit can serve as a guideline for developing that section.

- *Appoint a committee*

- Appoint a committee or workgroup that can use this toolkit to develop a comprehensive Closed POD plan. This committee should include human resource personnel, continuity managers, medical advisors, logistics specialists and security staff.



- *Determine who your site will serve*

- Decide whether you will accommodate employees' families in your preparedness effort, and identify beforehand how you will define household, dependents or family. Then determine how many total employees and family members will be served so that you'll be able to estimate the amount of prophylaxis needed at the time of a public health emergency. Additionally, determine whether you want to include contracted employees, vendors and even clients.

- *Protect Your Assets — Prepare Your Employees*

- As your business plans to become a Closed POD, employees should be informed about the process and how it will affect them. Encouraging input and substantial feedback from employees will add value to the emergency preparedness measures of your business as a whole. Identify employees within your business who will assist with the planning and preparation process and involve them early.

- *Provide education/information*

- Provide people with as much information about your Closed POD operations as possible. If you are not already doing so, consider having key employees trained in emergency preparedness, National Incident Management System (NIMS), and the Incident Command System (ICS).
- Emergency preparedness training courses, like the ones listed below, can be instructor-facilitated at your organization or taken online. These courses will help educate your employees about emergency preparedness procedures and protocols.



- Free online resources
  - <http://training.fema.gov/IS>
  - IS-100, IS-200 and IS-700
  - <http://www.redcross.org> <http://www.ready.gov> <http://www.pandemicflu.gov>
- *Identify a dispensing location on the premise*
  - Identify a dispensing location and type (See Appendix 2) on the premises in order to dispense medications to a large number of people in a relatively short time, you will need to identify ahead of time a particular location on the premises that is capable of certain accommodations. Some key factors to consider include:
    - Fairly large and open, preferably a large meeting room or cafeteria. Use the sample Closed POD Flow Diagrams (enclosed in toolkit pocket) to help determine an appropriate location.
    - Separate entrance and exit
    - Easily identifiable by all employees
    - Place to secure medications and supplies
    - Able to accommodate people with disabilities
    - Able to accommodate tables, chairs and large numbers of people
- *Prepare Your Facility*
  - Preparing your facility ahead of time for the possible activation of the Closed POD is essential.
- *Determine security needs and capabilities*
  - Consider your current security resources and capabilities and determine if additional security will be needed in an emergency to protect your facility and staff. Employees attending your Closed POD will need to feel safe to do so. Furthermore, all medications will need to be secured at all times.
- *Practice your plan before an emergency occurs*
  - Move people through the Closed POD in only **one** direction to avoid confusion and crossovers
- *Identify/purchase/store necessary supplies*
  - Office supplies (Pens, clipboards, etc.)
  - Tables and chairs
  - Bags or envelopes
  - Medical supplies (First Aid Kit)



- *Develop Your Procedures*

- The planning committee should take charge of developing procedures directly related to your Closed POD operations, in collaboration with DOH-Miami-Dade.
- Determine procedures specifically related to the activation, set-up, operation and deactivation of the Closed POD. Have procedures such as emergency call-down lists (also known as emergency calling trees) in place. The committee should lead the development of these procedures and work with local public health emergency planners as needed so that all parties involved are aware of the plans and procedures.
- Determine how medications will be requested, delivered and/or returned.
- Your business will need to collaborate with DOH-Miami-Dade to develop protocols for requesting a supply of medications from the national stockpile. You should have a count of the number of people you will supply with medications ready at the time of the emergency. This can be accomplished by maintaining accurate records and forms for employees and their household members, if applicable.
- Once a request has been made, the DOH-Miami-Dade will contact your business regarding the transfer of medications. You must identify individuals authorized to accept and sign for delivery and provide that information to the DOH-Miami-Dade. Your security personnel should be on-hand at all times when the medications are on the premises. Working closely with the DOH-Miami-Dade will ensure the best delivery planning for your business.
- It is entirely possible that there will be some medications left over after all of your employees have attended your Closed POD. These medications must be returned to the DOH-Miami-Dade so that they may be used for other community members.
- Firm up plans for handling medical emergencies, security concerns, etc. Your plan should include procedures for handling small/typical emergencies that could potentially happen during the dispensing process. Consider and plan for:
  - ❖ Minor medical emergencies – Call 9-1-1? Handle on-site?
  - ❖ Security breach – Call police? Handle on-site?

- *Exercise Your Plan*

- Make sure to practice the procedures you put into place. Exercising plans helps to identify any problems that can be rectified long before an emergency occurs. DOH-Miami-Dade will notify you of exercises and trainings that you may attend as well as help you in the process of putting together your own exercise.



## WHAT ABOUT LIABILITY...

Federal Immunity: The Public Readiness and Emergency Preparedness (PREP) Act sets forth the immunity for “covered persons” from tort claims related to, in this case, “covered countermeasure”. The Closed POD may be considered a covered person; a “Program Planner of countermeasure (i.e., individuals and entities involved in planning and administering programs for distribution of a countermeasure)...” appears in CDC Public Readiness and Emergency Preparedness Act Questions and Answers, 42 USC §247d- 6d(i)(7)-(7)(A)(ii). As a covered person, if applicable, ENTITY may be immune from suit and liability under Federal and State law with respect to "all claims for loss caused by, arising out of, relating to, or resulting from the administration to or the use by an individual of a covered countermeasure...". 42 U.S.C. § 247d-6d(a)(1).

*\*\*Legal counsel should be consulted throughout your planning process. We have legal specialists from the Centers for Disease Control and Prevention that are available to assist as needed. \*\**

## **FREQUENTLY ASKED QUESTIONS (FAQ)**

**Q:** Is it possible that our business will need to operate our Closed POD plan after-hours, during the weekend, or on a holiday?

**A:** Public health emergencies and/or bioterrorism attacks can strike at any time. It is essential that your business be prepared to operate Closed POD during non-working hours. Develop after-hours contact lists for key individuals and provide them in your Closed POD plan to the DOH-Miami-Dade. Evaluate your facility and determine what and how long it would take to open and provide Closed POD services. Develop communication/notification procedures to alert and inform your employees during non-working hours.

**Q:** What about employees who commute long distances to and from work?

**A:** As a Closed POD, you should expect to provide medications to all employees and possibly their families. Medications should be made available to long-distance commuters, but they are NOT required to attend your Closed POD. It may be more convenient for these individuals to attend Open PODs near their residences. In any case, you should plan for each and every employee.

**Q:** Could some parts of the region be affected more than others?

**A:** Public health emergencies can vary dramatically depending on factors such as weather, the disease, the mode of transmission, etc. It is entirely possible that some parts of a region may be required to provide emergency medications while others may not. DOH-Miami-Dade will use epidemiology — the study and/or investigation of diseases and outbreaks in a defined area or population — to determine the full impact of the public health emergency. Please be aware that even though an emergency event might occur, the services of your Closed POD may not be needed. Listen for information from DOH-Miami-Dade throughout the event, they will notify you of when and if you need to activate.

**Q:** What happens after dispensing operations are completed?

**A:** After your Closed POD has completed its operations, you will need to provide the following to the DOH-Miami-Dade:

- Any unused medications
- Copies of all health assessment forms
- Copies of any incident reports

## **THANK YOU**

The Florida Department of Health in Miami-Dade County would like to thank you for taking the time to examine these materials, and to consider taking the first step toward becoming a Closed Point of Dispensing.

By developing long-lasting relationships with the private sector, government agencies will be more adept and prepared to respond to a potential public health emergency. We appreciate your cooperation.

**For more information, please contact:**

**Alazandria Cruze, MPH, CPH**

**Cities Readiness Initiative Miami-Dade County Coordinator**


**305-470-6931**

**[CRI.MiamiDade@flhealth.gov](mailto:CRI.MiamiDade@flhealth.gov)**



# Appendix 1

## Head of Household Form:



**CLIENT REGISTRATION FORM - Region 7 County Health Departments**

County: Broward \_\_\_\_\_ Miami-Dade \_\_\_\_\_ Monroe: \_\_\_\_\_ Palm Beach: \_\_\_\_\_ Closed POD \_\_\_\_\_ POD # \_\_\_\_\_

By signing below, I acknowledge I am receiving medications for the person(s) listed below. I am authorized to sign for these persons and I agree to provide the prescribed medications and instructions as provided to me to each of them. I understand that medications are being provided to protect from potential illness and acceptance of medications is voluntary.

Signature (person picking up medication): \_\_\_\_\_ Zip Code: \_\_\_\_\_ Contact Telephone #: \_\_\_\_\_

**WARNING:** If anyone is currently taking any other medications, consult with your physician for possible adverse drug interactions. Complete one line for each person. Give completed form to Triage staff for processing

Print the full name and age of each person for whom you are picking up medication (your name on line 1)	Age	If Under Age 18: Weight (in Pounds)	Symptoms such as Fever, Non-productive cough, Muscle /Joint aches, vomiting, Extreme fatigue that has been getting worse over the last 48 hours.	Answer YES or No for the group Member if they have or had Myasthenia Gravis	Answer YES or No for the group member if Pregnant or Breast Feeding	Print first letter of medication if allergic: Ciprofloxacin Tetracycline Doxycycline Penicillin Amoxicillin Levaquin If none, write NO	Medication Prescribed	Referred to seek Medical Attention	Lot Number or Label (affix labels below)
1. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
2. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
3. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
4. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
5. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
6. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
7. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
8. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
9. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
10. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
11. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
12. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
13. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
14. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		
15. _____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____	Cipro <input type="checkbox"/> 500 mg. Doxy <input type="checkbox"/> 100 mg. Amox <input type="checkbox"/> 500 mg.		

Triage by (Print Last Name): \_\_\_\_\_

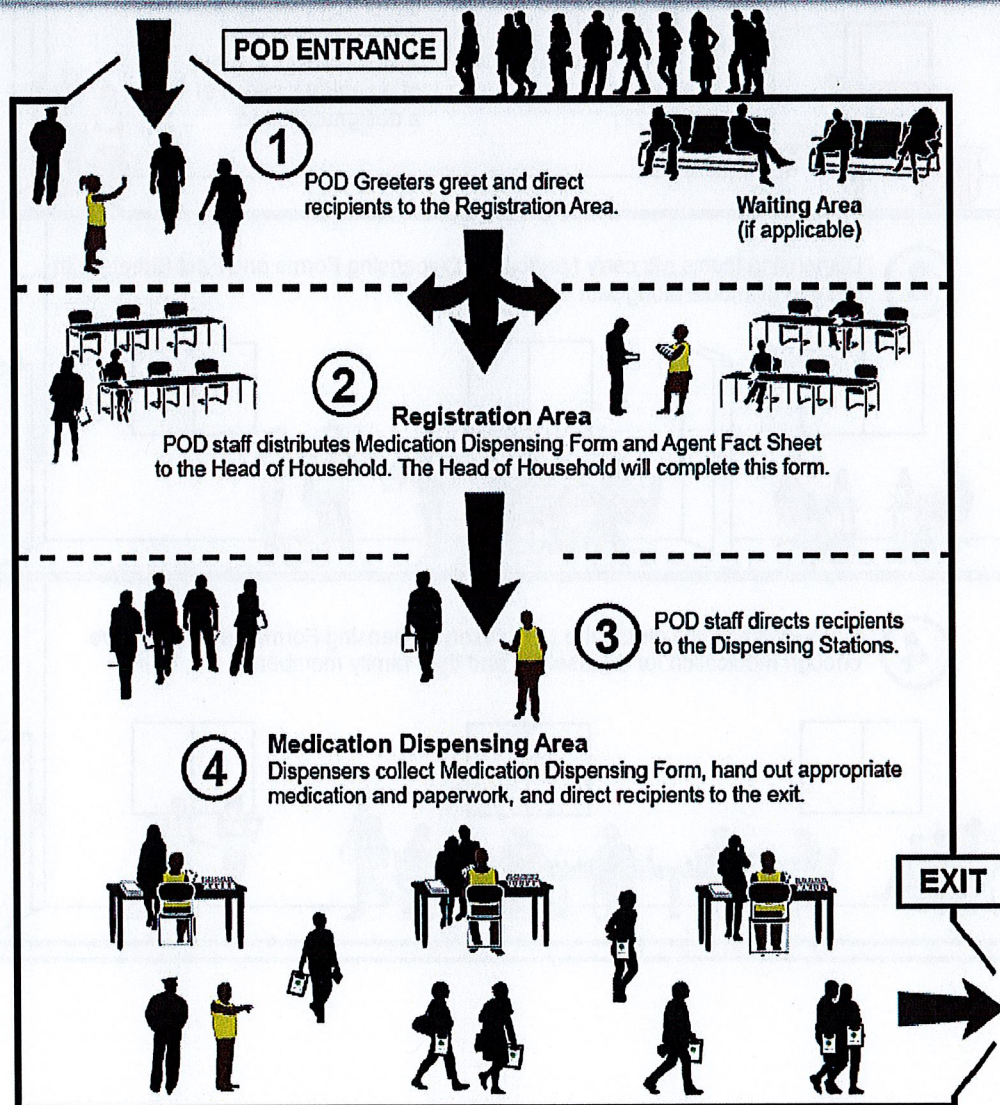


## Appendix 2

### Closed Point of Dispensing Layouts – Centralized vs. Decentralized

#### Centralized Dispensing Plan

Use the Centralized Plan if you want all recipients to come to one central location to receive medications. This would work best in a cafeteria or community room setting for a larger crowd.





## Decentralized Dispensing Plan

Use the decentralized floor plan if business needs to continue as usual. Assigned POD staff move from location to location within the organization to have recipients complete paperwork and hand out medication.

